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CONFIRMATION NO. 2422

SERIAL NUMBER 10/729,197	FILING DATE 12/05/2003 RULE	CLASS 385	GROUP ART UNIT 2883	ATTORNEY DOCKET NO. 2003P13557US
APPLICANTS Michael Twerdochlib, Oviedo, FL;				
** CONTINUING DATA ***** <div style="display: flex; justify-content: space-between; width: 80%; margin-left: 10%;"> none DLD </div>				
** FOREIGN APPLICATIONS ***** <div style="display: flex; justify-content: space-between; width: 80%; margin-left: 10%;"> none DLD </div>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/09/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	State or Country FL	SHEETS DRAWING 3	TOTAL CLAIMS 20
Verified and Acknowledged <div style="display: flex; align-items: center;"> <div style="border-bottom: 1px solid black; width: 150px; margin-right: 10px;"></div> <div style="text-align: center;"> <input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no <small>Examiner's Signature</small> </div> <div style="border-bottom: 1px solid black; width: 50px; margin-left: 10px;"></div> <div style="text-align: center;"> <input type="checkbox"/> Met after Allowance <small>Initials</small> </div> </div>		INDEPENDENT CLAIMS 3		
ADDRESS Siemens Corporation Intellectual Property Department 170 Wood Avenue South Iselin , NJ 08830				
TITLE Hermetic seal for use in converting optical signals to electrical signals				
FILING FEE RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			
<div style="display: flex; justify-content: flex-end;"> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"> <input type="checkbox"/> All Fees </div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"> <input type="checkbox"/> 1.16 Fees (Filing) </div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"> <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) </div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"> <input type="checkbox"/> 1.18 Fees (Issue) </div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"> <input type="checkbox"/> Other _____ </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> Credit </div> </div>				